

Here is Your **KEY**

to

Tempe School District No. 3

ALL APPLICANTS MUST:

1. Complete a **Classified Application form**.
2. Provide current telephone numbers for prior employment verification.
3. Submit two (2) letters of reference. (**Applications WILL NOT be accepted without reference letters. These should be from persons other than relatives.**)
4. Complete the tax forms and the Consent to Conduct Background Investigation and Release form.

INSTRUCTIONAL ASSISTANT POSITIONS:

The No Child Left Behind (NCLB) Act requires: 60 credit hours or AA degree or a passing score on the ParaPro assessment test. "Official transcripts" must accompany your application.

CLERICAL POSITIONS:

- A written skills test is **REQUIRED**.
- A **CALCULATOR** may be brought to the test.
- A typing test is **REQUIRED**.
- A minimum of 40 w.p.m. is required, except for positions that state a higher speed.

TESTING SESSIONS ARE HELD ON THURSDAY OF EACH WEEK AT 2:00 P.M. AT THE DISTRICT OFFICE.

Allow 1 to 2 hours for testing.

APPOINTMENTS NOT NECESSARY.

FINGERPRINTS:

State law requires that all new employees have their fingerprints registered. The District will fingerprint all new classified employees. **A \$25.00 fee** for the fingerprint check will be paid by the employee. A current Department of Public Safety fingerprint card will be accepted.

PREVIOUS FINGERPRINTS FROM OTHER EMPLOYERS WILL NOT BE ACCEPTED.

CHANGE OF ASSIGNMENT:

New hires, former employees, and transfers **MUST** complete a 90-day work evaluation in their assignment before they may apply for a change of assignment.

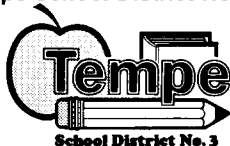
FYI:

Applicants and employees **MUST** maintain a current up-to-date file. You can stop by the reception desk or call (480) 730-7100 to request an updated application.

Front Desk: (480) 730-7100

Job Line: (480) 730-7114

Website: www.tempeschools.org



CLASSIFIED PERSONNEL Application

An Affirmative Action
Equal Opportunity
Employer

Please Print

Date _____ Social Security Number _____ Voluntary _____ Telephone _____

Name _____
Last First Middle

Present Address _____
Street City State Zip Code

Permanent Address _____
Street City State Zip Code

Other names used on other employment or educational records _____

List name, address, and telephone number of person to be contacted in case of emergency. **(Must Be Completed)**

Name _____

Address _____ Telephone _____

When will you be available? _____ Would you be willing to work part-time? ☐ Yes ☐ No

Employment Desired

Please select specific area(s) of interest for which you are qualified for employment.
Give FIRST, SECOND, and THIRD CHOICE ONLY.

OFFICE

- ____ Receptionist (32)
- ____ Clerical (31)
- ____ Secretary (35)
- ____ Accounting (37)
- ____ District Utility (33)

ADDITIONAL SERVICES

- ____ Nurse (42)
- ____ Electrician (25)
- ____ Custodian (23)
- ____ Groundskeeper (26)
- ____ Warehouse (28)
- ____ Cafeteria (01)

ASSISTANT

- ____ Regular Classroom (11)
- ____ Special Education - Personal (13)
- ____ Special Education - Resource (14)
- ____ Special Education MH - PALS (15)
- ____ Special Education EH - Spark (16)

____ Bilingual (17)

____ ESL (18)

____ Health (41)

____ Library (39)

____ Computer Lab (38)

TRANSPORTATION

- ____ Bus Driver* (05)
- Appropriate Class License No.: _____
- ____ Bus Aide (06)
- ____ Crossing Guard (08)

OTHER

*The law requires bus drivers to be at least 21 years of age.

Work Experience

DATES EMPLOYED	EMPLOYER'S NAME (include address and phone)	SUPERVISOR'S NAME	REASON FOR LEAVING	POSITION TITLE
From _____ To _____	Phone _____			
From _____ To _____	Phone _____			
From _____ To _____	Phone _____			
From _____ To _____	Phone _____			

1. Please explain any gaps in employment _____

2. Have you previously been employed by Tempe School District No. 3? ☐ Yes ☐ No

If yes, explain _____

3. CRT / computer experience? ☐ Yes ☐ No ☐ Data Input? ☐ Applications? ☐ Other?

If yes, explain _____

Education

Attach additional pages if more room is needed.	NAME OF SCHOOL	LOCATION	YEARS ATTENDED	DATE GRADUATED	SUBJECTS STUDIED
HIGH SCHOOL					
COLLEGE					
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL					

Personal Information

Name _____

Please Print

1. What languages other than English do you speak? _____ read? _____ write? _____

2. List any relatives now employed by Tempe School District No. 3. _____

3. List any relatives that are vendors with Tempe School District No. 3. _____

Please answer the following questions in your own handwriting.

A. List two (2) reasons why you are applying for this position.

TITLE OF POSITION _____

1. _____

2. _____

B. List one (1) strength or asset that you feel you have that would benefit Tempe School District No. 3.

1. _____

C. What would you like to be doing 5 years from now? _____

Personal References

Name _____

Address _____

Title/Relationship _____

Phone Number _____

Name _____

Address _____

Title/Relationship _____

Phone Number _____

Name _____

Address _____

Title/Relationship _____

Phone Number _____

Name _____

Address _____

Title/Relationship _____

Phone Number _____

Prior Adverse Personnel Actions

Because of the tremendous responsibility the District has to its students and the community, all applicants are required to provide answers to the following questions. Questions regarding this portion of the application should be directed to the Director of Human Resources. Use additional paper if necessary to completely and accurately answer these questions and provide any other information you believe might be relevant.

An answer of "yes" to any of the questions below will not necessarily be a bar to employment. However, the District may refuse to hire applicants and may discharge employees who have falsified answers to the questions or who fail to accurately and completely answer such questions.

1. Have you ever been asked to resign from a position, resigned while charges were pending against you or been dismissed from a position? You must answer "yes" even if the matter was resolved through a settlement or severance agreement, regardless of its terms.

☐ Yes ☐ No If you answer "yes," you must answer the following questions:

- a. Explanation of the incident(s) giving rise to the charges and/or a statement of the accusation against you _____

- b. Date(s) of resignation/dismissal _____
- c. Name of prior employer _____
- d. Address/telephone of prior employer _____

2. Have you ever had any professional license or certificate revoked or suspended?

☐ Yes ☐ No If you answer "yes," you must answer the following questions:

- a. Explanation of the incident(s) giving rise to the revocation/suspension _____

- b. Date(s) of proceedings _____
- c. Name of agency _____
- d. Address/telephone of agency _____

- e. Final disposition _____

3. Are you currently being investigated for any alleged misconduct or alleged grounds for discipline or is any charge or complaint now pending against you by any professional licensing, certification or other regulatory body or by your current or any previous employer?

☐ Yes ☐ No If you answer "yes," you must answer the following questions:

- a. Explanation of the incident(s) giving rise to the revocation/suspension _____

- b. Anticipated date(s) of proceedings _____
- c. Name of agency/employer _____
- d. Address/telephone of agency/employer _____

Conviction Report

Because of the tremendous responsibility the District has to its students and the community, all applicants and employees are required to report criminal convictions. Questions regarding this portion of the application should be directed to the Director of Human Resources.

For purposes of this form, the term "conviction" means the final judgment on a verdict or a finding of guilty, plea of guilty or a plea of nolo contendere in any court of competent jurisdiction in a criminal case, including, but not limited to city, state, county or federal courts. For purposes of this form, you must answer "yes" to the questions even if an appeal is pending or could be taken and even if the conviction was subsequently dismissed, set aside, deferred, vacated or expunged.

A conviction record will not necessarily be a bar to employment. The District will consider the following in reviewing a conviction record: (1) Length of time since the conviction; (2) Circumstances of the offense; (3) Number of convictions; (4) Employment record since the conviction; (5) Rehabilitation; (6) Nature of the job for which the applicant has applied; and (7) Any other relevant information.

NOTE: The District may refuse to hire applicants and may discharge employees who have falsified answers to inquires about their conviction record or fail to accurately and completely answer such questions. The District may also file a criminal report against an applicant/employee for filing false information with a public agency.

Applicants and employees must report any convictions that occur subsequent to the time they initially complete this form.

1. Have you ever been convicted of, admitted committing or are you awaiting trial for any crime (excluding only minor traffic violations not involving any allegation of drug or alcohol impairment)?

☐ Yes ☐ No

If you answer "yes," you must answer the following questions:

- a. Explanation of the incident(s) giving rise to the conviction and/or a statement of the accusation against you _____

- b. Date(s) of the proceedings _____
- c. Name of court where proceedings occurred _____
- d. Final disposition of the case _____

Use additional paper if necessary to completely and accurately answer these questions and provide any other information you believe might be relevant.

2. Have you ever been convicted of a dangerous crime against children, defined in A.R.S. §13-604.01 as including second degree murder, aggravated assault, sexual assault, child molestation, sexual conduct with a minor, commercial sexual exploitation of a minor, sexual exploitation of a minor, child abuse, kidnapping and sexual abuse?

☐ Yes ☐ No

If you answer "yes," you must answer the following questions:

- a. Explanation of the incident(s) giving rise to the conviction and/or a statement of the accusation against you _____

- b. Date(s) of the proceedings _____
- c. Name of court where proceedings occurred _____
- d. Final disposition of the case _____

Use additional paper if necessary to completely and accurately answer these questions and provide any other information you believe might be relevant.

Fingerprint/Background Check

Upon conditional date of hire, all classified employees must be fingerprinted by the Human Resources Department. Fingerprint checks will be made by the Arizona Department of Public Safety and the Federal Bureau of Investigation. Upon conditional hire, all classified employees must pay the cost of fingerprinting to Tempe School District No. 3. **All employment with Tempe School District No. 3 is conditional until the Governing Board approves such employment and until all background checks, including those involving mandatory fingerprinting, have proved to be satisfactory in the sole discretion of the District.** Tempe School District No. 3 reserves the right to contact all agencies and individuals who have information on the applicant.

Upon conditional hire, all classified employees must certify, before a notary public, on a written form to be provided by the District that they are not awaiting trial and have never been convicted of or admitted committing criminal offenses as specified in "Certification In Accordance with A.R.S. § 15-512.D."

Immunization

Arizona State Department of Health Services regulations (R9-6-729 and R9-6-742) require that an immunization record for each school employee be on file prior to employment. It shall be a condition of employment that the employee provide the district with proof of immunization for Rubella or Rubeola.

- ☐ I was born January 1957 or later and will provide proof of immunization or immunity upon employment.
- ☐ I was born January 1957 or later and will submit a statement signed by a licensed physician or state/local health officer affirming that immunization is medically inappropriate.
- ☐ I will provide a statement indicating that religious reasons preclude compliance.
- ☐ I was born before 1957 and am not required to show proof of immunization.

Under penalty of prosecution and dismissal, I hereby certify that the information presented on this application is true, accurate and complete. I authorize the investigation of all statements contained herein and understand that any document relevant to this information may be reviewed by the agents of Tempe School District No. 3. I authorize the Tempe School District No. 3 to make reference checks prior to employment and I will execute such documents to facilitate this investigation. **I understand that all employment with TD3 is conditional until the Governing Board approves such employment and until all background checks, including those involving mandatory fingerprinting, have proved satisfactory in the sole discretion of the District.** I understand that misrepresentation or omission of pertinent facts may be cause for dismissal.

Signature

Date

TEMPE SCHOOL DISTRICT NO. 3
CONSENT TO CONDUCT BACKGROUND INVESTIGATION
AND RELEASE

I, _____ [applicant's name], have applied for employment with this School District

to work as a _____ [job title]. I understand that in order for the School District to determine my eligibility, qualifications and suitability for employment, the School District will conduct a background investigation if I am considered for an offer of employment. This investigation may include asking my current and any former employer and educational institution I have attended about my education, training, experience, qualifications, job performance, professional conduct and evaluations, as well as confirming my dates of employment or enrollment, position(s) held, reason(s) for leaving employment, whether I could be rehired, reasons for not rehiring (if applicable) and similar information.

I hereby give my consent for any employer or educational institution to release any information requested in connection with this background investigation.

According to the Family Educational Rights and Privacy Act, I understand that I have a right to see most education records that are maintained by any educational institution.

I waive _____ / do not waive _____ (*initial only one*) my right to see any written reference or other information provided to the School District by any educational institution.

According to Arizona Revised Statutes Section 23-1361, any employer that provides a written communication to the School District regarding my current or past employment must send me a copy at my last known address. I acknowledge that some employers are unwilling to provide factual written references concerning a current or past employee unless they may do so confidentially, without revealing the references to the employee, and that the School District will not further consider my application if it cannot complete its background investigation.

I waive _____ / do not waive _____ (*initial only one*) my right to receive a copy of any written communication furnished to the School District by any employer.

Whether or not I have waived my right to see or to receive copies of written references furnished to the School District by employers or educational institutions, I release, hold harmless and agree not to sue or file any claim of any kind against any current or former employer or educational institution, any officer or employee of either, that in good faith furnishes written or oral references requested by this School District to complete its background investigation.

A photocopy or facsimile ("fax") copy of this form that shows my signature shall be as valid as an original.

DATED this _____ day of _____, 200_____.
month year

Witness Signature

Applicant Signature